

PATENT
Attorney Docket No. PRC-002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Spiers, William A.
INTERNATIONAL APPLICATION NO.: PCT/GB04/04173
INTERNATIONAL FILING DATE: September 28, 2004
U.S. APPLICATION NO.: 10/573,872
TITLE: Blood Co-Processing For Contingent Autologous Leukocyte Transplantation

Mail Stop PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN
THE UNITED STATES DESIGNATED/ELECTED OFFICE

Sir:

This paper is responsive to the Notification of Missing Requirements mailed from the U.S. Patent and Trademark Office on September 1, 2006, in relation to the above-identified patent application. A copy of the Notification of Missing Requirements accompanies this paper.

In response to the Notification, Applicant submits a Declaration in compliance with 37 C.F.R. 1.497(a) and (b), as well as a check in the amount of \$65.00 to cover the surcharge under 37 C.F.R. 1.492(h) at the small entity rate for late submission of the declaration. Applicant believes that this submission completes the requirements for acceptance of the above-identified application under 35 U.S.C. 371. However, if any further fee is required to maintain pendency of the above-identified application, please charge the fee to Attorney's Deposit Account No. 50-1721.

10/16/2006 LLANDGRA 00000073 10573872

01 FC:2617

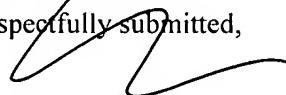
65.00 0P

Date: October 10, 2006
Reg. No. 39,061

Tel. No.: (617) 261-3150
Fax No.: (617) 261-3175

BOS-1014918 v1

Respectfully submitted,



Christine C. Vito
Attorney for the Applicants
Kirkpatrick & Lockhart Nicholson
Graham LLP
State Street Financial Center
One Lincoln Street
Boston, Massachusetts 02111-2950

TRANSMITTAL FORM

	Application Serial Number	10/573,872
	Filing Date	March 29, 2006
	First Named Inventor	Spiers
	International Application No.	PCT/GB04/04173
	International Filing Date	September 28, 2004
	Attorney Docket No.	PRC-002
	Confirmation No.	9917

ENCLOSURES (check all that apply)

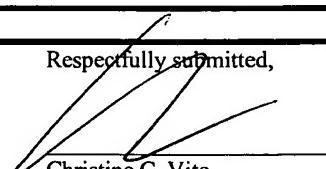
<input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.) <input checked="" type="checkbox"/> Check Attached in the amount of \$65.00 <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input checked="" type="checkbox"/> Copy of Notification of Missing Requirements under 35 U.S.C. 371 in the United States Designated/Elected Office (2 pgs.) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application (2 pgs.) <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below)</i> Response to Notification of Missing Requirements under 35 U.S.C. 371 in the United States Designated/Elected Office (1 pg.)
---	---	--

CORRESPONDENCE ADDRESS

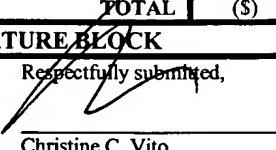
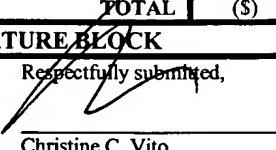
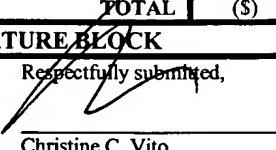
Direct all correspondence to: Patent Administrator
 Kirkpatrick & Lockhart Nicholson
 Graham LLP
 State Street Financial Center
 One Lincoln Street
 Boston, MA 02111-2950
 Tel. No.: (617) 261-3100
 Fax No.: (617) 261-3175

SIGNATURE BLOCK

Date: October 10, 2006
 Reg. No. 39,061
 Tel. No.: (617) 261-3150
 Fax No.: (617) 261-3175

Respectfully submitted,

 Christine C. Vito
 Attorney for the Applicant
 Kirkpatrick & Lockhart Nicholson
 Graham LLP
 State Street Financial Center
 One Lincoln Street
 Boston, MA 02111-2950

**FEE TRANSMITTAL
FY 2006**

FEE TRANSMITTAL FY 2006		<i>Complete if Known</i>																																																																																																																																																																																																																																												
		Application Serial Number	10/573,872																																																																																																																																																																																																																																											
		Filing Date	March 29, 2006																																																																																																																																																																																																																																											
		First Named Inventor	Spiers																																																																																																																																																																																																																																											
		International Application No.	PCT/GB04/04173																																																																																																																																																																																																																																											
		International Filing Date	September 28, 2004																																																																																																																																																																																																																																											
		Confirmation No.	9917																																																																																																																																																																																																																																											
Attorney Docket No.		PRC-002																																																																																																																																																																																																																																												
METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																																																																												
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>65.00</td></tr> <tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr> <tr><td>120</td><td>60</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>450</td><td>225</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1020</td><td>510</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1590</td><td>795</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>2160</td><td>1080</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>500</td><td>250</td><td>Notice of Appeal</td><td></td></tr> <tr><td>500</td><td>250</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1000</td><td>500</td><td>Request for oral hearing</td><td></td></tr> <tr><td>400</td><td>400</td><td>Petitions to the Commissioner (Gp. I)</td><td></td></tr> <tr><td>200</td><td>200</td><td>Petitions to the Commissioner (Gp. II)</td><td></td></tr> <tr><td>130</td><td>130</td><td>Petitions to the Commissioner (Gp. III)</td><td></td></tr> <tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr> <tr><td>790</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>790</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr> <tr><td>130</td><td>65</td><td>Submission of Terminal Disclaimer</td><td></td></tr> <tr><td colspan="4"><hr/></td></tr> <tr> <td colspan="2"> FEE CALCULATION 1. FILING/SEARCH/EXAM/SIZE FEES </td> <td colspan="2"></td> </tr> <tr> <td colspan="2"> Large Entity <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table> </td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td> <table border="1"> <thead> <tr> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr><td>Total Claims</td><td>- 20 =</td><td>x \$ 50.00 =</td><td></td></tr> <tr><td>Independent Claims</td><td>- 3 =</td><td>x \$200.00 =</td><td></td></tr> </tbody> </table> </td> <td colspan="2"></td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Multiple Dependent Claim(s), if any </td> <td>\$360.00 =</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td>TOTAL:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td>SMALL ENTITY DISCOUNT:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2"></td> <td>SUBTOTAL (1)</td> <td>(\$)</td> <td>0.00</td> </tr> <tr> <td colspan="2">2. AMENDMENT CLAIM FEES</td> <td colspan="2"></td> <td></td> </tr> <tr> <td colspan="2"> <table border="1"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Total</td><td>- - =</td><td></td><td>x \$ 50.00 =</td><td></td></tr> <tr><td>Indep.</td><td>- - =</td><td></td><td>x \$200.00 =</td><td></td></tr> <tr><td colspan="2"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td><td></td><td>+ \$360.00 =</td><td></td></tr> </tbody> </table> </td> <td colspan="2"></td> <td>SUBTOTAL (3) (\$) 65.00</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td>SUBTOTAL (1) 0.00</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td>SUBTOTAL (2) 0.00</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td>SUBTOTAL (3) 65.00</td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td>TOTAL (\$) 65.00</td> </tr> <tr> <td colspan="2">CORRESPONDENCE ADDRESS</td> <td colspan="3">SIGNATURE BLOCK</td> </tr> <tr> <td colspan="2">Direct all correspondence to:</td> <td colspan="3">  Respectfully submitted, Christine C. Vito Attorney for the Applicant Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 </td> </tr> <tr> <td colspan="2"> Patent Administrator Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175 </td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td colspan="3"></td> </tr> <tr> <td colspan="2"></td> <td colspan="3"></td> </tr> </tbody></table>		Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath	65.00	50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		120	60	Extension for reply within first month		450	225	Extension for reply within second month		1020	510	Extension for reply within third month		1590	795	Extension for reply within fourth month		2160	1080	Extension for reply within fifth month		500	250	Notice of Appeal		500	250	Filing a brief in support of an appeal		1000	500	Request for oral hearing		400	400	Petitions to the Commissioner (Gp. I)		200	200	Petitions to the Commissioner (Gp. II)		130	130	Petitions to the Commissioner (Gp. III)		180	180	Submission of Information Disclosure Statement		790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		130	65	Submission of Terminal Disclaimer		<hr/>				FEE CALCULATION 1. FILING/SEARCH/EXAM/SIZE FEES				Large Entity <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table>		Fee (\$)	Fee Description	Fee Paid	300	Utility filing fee		500	Utility search fee		200	Utility exam fee		250	Utility size fee (each add'l 50 pgs. over 100)		200	Design filing fee		100	Design search fee		130	Design exam fee		250	Design size fee (each add'l 50 pgs. over 100)						<table border="1"> <thead> <tr> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr><td>Total Claims</td><td>- 20 =</td><td>x \$ 50.00 =</td><td></td></tr> <tr><td>Independent Claims</td><td>- 3 =</td><td>x \$200.00 =</td><td></td></tr> </tbody> </table>	Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =	x \$ 50.00 =		Independent Claims	- 3 =	x \$200.00 =				<input type="checkbox"/> Multiple Dependent Claim(s), if any		\$360.00 =					TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)	(\$)	0.00	2. AMENDMENT CLAIM FEES					<table border="1"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Total</td><td>- - =</td><td></td><td>x \$ 50.00 =</td><td></td></tr> <tr><td>Indep.</td><td>- - =</td><td></td><td>x \$200.00 =</td><td></td></tr> <tr><td colspan="2"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td><td></td><td>+ \$360.00 =</td><td></td></tr> </tbody> </table>		Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	- - =		x \$ 50.00 =		Indep.	- - =		x \$200.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =				SUBTOTAL (3) (\$) 65.00					SUBTOTAL (1) 0.00					SUBTOTAL (2) 0.00					SUBTOTAL (3) 65.00					TOTAL (\$) 65.00	CORRESPONDENCE ADDRESS		SIGNATURE BLOCK			Direct all correspondence to:		 Respectfully submitted, Christine C. Vito Attorney for the Applicant Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950			Patent Administrator Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175														
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																																																																																																																																																																											
130	65	Surcharge - late filing fee or oath	65.00																																																																																																																																																																																																																																											
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																																																																																																																																																																												
130	130	Non-English specification																																																																																																																																																																																																																																												
2,520	2,520	Request for ex parte reexamination																																																																																																																																																																																																																																												
120	60	Extension for reply within first month																																																																																																																																																																																																																																												
450	225	Extension for reply within second month																																																																																																																																																																																																																																												
1020	510	Extension for reply within third month																																																																																																																																																																																																																																												
1590	795	Extension for reply within fourth month																																																																																																																																																																																																																																												
2160	1080	Extension for reply within fifth month																																																																																																																																																																																																																																												
500	250	Notice of Appeal																																																																																																																																																																																																																																												
500	250	Filing a brief in support of an appeal																																																																																																																																																																																																																																												
1000	500	Request for oral hearing																																																																																																																																																																																																																																												
400	400	Petitions to the Commissioner (Gp. I)																																																																																																																																																																																																																																												
200	200	Petitions to the Commissioner (Gp. II)																																																																																																																																																																																																																																												
130	130	Petitions to the Commissioner (Gp. III)																																																																																																																																																																																																																																												
180	180	Submission of Information Disclosure Statement																																																																																																																																																																																																																																												
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																																																																																																																																																																												
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																																																																																																																																																																												
100	100	Certificate of Correction for applicant's error																																																																																																																																																																																																																																												
130	65	Submission of Terminal Disclaimer																																																																																																																																																																																																																																												
<hr/>																																																																																																																																																																																																																																														
FEE CALCULATION 1. FILING/SEARCH/EXAM/SIZE FEES																																																																																																																																																																																																																																														
Large Entity <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table>		Fee (\$)	Fee Description	Fee Paid	300	Utility filing fee		500	Utility search fee		200	Utility exam fee		250	Utility size fee (each add'l 50 pgs. over 100)		200	Design filing fee		100	Design search fee		130	Design exam fee		250	Design size fee (each add'l 50 pgs. over 100)																																																																																																																																																																																																																			
Fee (\$)	Fee Description	Fee Paid																																																																																																																																																																																																																																												
300	Utility filing fee																																																																																																																																																																																																																																													
500	Utility search fee																																																																																																																																																																																																																																													
200	Utility exam fee																																																																																																																																																																																																																																													
250	Utility size fee (each add'l 50 pgs. over 100)																																																																																																																																																																																																																																													
200	Design filing fee																																																																																																																																																																																																																																													
100	Design search fee																																																																																																																																																																																																																																													
130	Design exam fee																																																																																																																																																																																																																																													
250	Design size fee (each add'l 50 pgs. over 100)																																																																																																																																																																																																																																													
		<table border="1"> <thead> <tr> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr><td>Total Claims</td><td>- 20 =</td><td>x \$ 50.00 =</td><td></td></tr> <tr><td>Independent Claims</td><td>- 3 =</td><td>x \$200.00 =</td><td></td></tr> </tbody> </table>	Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =	x \$ 50.00 =		Independent Claims	- 3 =	x \$200.00 =																																																																																																																																																																																																																																	
Number Filed	Number Extra	Rate	Amount																																																																																																																																																																																																																																											
Total Claims	- 20 =	x \$ 50.00 =																																																																																																																																																																																																																																												
Independent Claims	- 3 =	x \$200.00 =																																																																																																																																																																																																																																												
<input type="checkbox"/> Multiple Dependent Claim(s), if any		\$360.00 =																																																																																																																																																																																																																																												
		TOTAL:																																																																																																																																																																																																																																												
		SMALL ENTITY DISCOUNT:																																																																																																																																																																																																																																												
		SUBTOTAL (1)	(\$)	0.00																																																																																																																																																																																																																																										
2. AMENDMENT CLAIM FEES																																																																																																																																																																																																																																														
<table border="1"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>Total</td><td>- - =</td><td></td><td>x \$ 50.00 =</td><td></td></tr> <tr><td>Indep.</td><td>- - =</td><td></td><td>x \$200.00 =</td><td></td></tr> <tr><td colspan="2"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td><td></td><td>+ \$360.00 =</td><td></td></tr> </tbody> </table>		Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	- - =		x \$ 50.00 =		Indep.	- - =		x \$200.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =				SUBTOTAL (3) (\$) 65.00																																																																																																																																																																																																																						
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																																																																																																																																																																										
Total	- - =		x \$ 50.00 =																																																																																																																																																																																																																																											
Indep.	- - =		x \$200.00 =																																																																																																																																																																																																																																											
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =																																																																																																																																																																																																																																											
				SUBTOTAL (1) 0.00																																																																																																																																																																																																																																										
				SUBTOTAL (2) 0.00																																																																																																																																																																																																																																										
				SUBTOTAL (3) 65.00																																																																																																																																																																																																																																										
				TOTAL (\$) 65.00																																																																																																																																																																																																																																										
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK																																																																																																																																																																																																																																												
Direct all correspondence to:		 Respectfully submitted, Christine C. Vito Attorney for the Applicant Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950																																																																																																																																																																																																																																												
Patent Administrator Kirkpatrick & Lockhart Nicholson Graham LLP State Street Financial Center One Lincoln Street Boston, MA 02111-2950 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175																																																																																																																																																																																																																																														

Express Mail Mailing Label No.: EV899585611US

UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov

U.S. APPLICATION NUMBER NO.	FIRST NAMED APPLICANT	ATTY. DOCKET NO.
10/573,872	William Arthur Spiers	PRC002
INTERNATIONAL APPLICATION NO.		
PCT/GB04/04173		
I.A. FILING DATE	PRIORITY DATE	
09/28/2004	09/30/2003	

022832
 KIRKPATRICK & LOCKHART NICHOLSON GRAHAM LLP
 STATE STREET FINANCIAL CENTER
 ONE LINCOLN STREET
 BOSTON, MA 02111-2950

CONFIRMATION NO. 9917

371 FORMALITIES LETTER



OC000000020266583

COPY

Date Mailed: 09/01/2006

NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)

The following items have been submitted by the applicant or the IB to the United States Patent and Trademark Office as a Designated / Elected Office (37 CFR 1.495).

- Indication of Small Entity Status
- Copy of the International Application filed on 03/29/2006
- Request for Immediate Examination filed on 03/29/2006
- U.S. Basic National Fees filed on 03/29/2006
- Priority Documents filed on 03/29/2006

The applicant needs to satisfy supplemental fees problems indicated below.

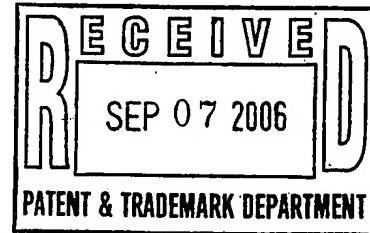
The following items **MUST** be furnished within the period set forth below in order to complete the requirements for acceptance under 35 U.S.C. 371:

- Oath or declaration of the inventors, in compliance with 37 CFR 1.497(a) and (b), identifying the application by the International application number and international filing date.
- To avoid abandonment, a surcharge (for late submission of filing fee, search fee, examination fee or oath or declaration) as set forth in 37 CFR 1.492(h) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

SUMMARY OF FEES DUE:

Total additional fees required for this application is **\$65** for a Small Entity:

- \$65 Surcharge.



ALL OF THE ITEMS SET FORTH ABOVE MUST BE SUBMITTED WITHIN TWO (2) MONTHS FROM THE DATE OF THIS NOTICE OR BY 32 MONTHS FROM THE PRIORITY DATE FOR THE APPLICATION,

WHICHEVER IS LATER. FAILURE TO PROPERLY RESPOND WILL RESULT IN ABANDONMENT.

The time period set above may be extended by filing a petition and fee for extension of time under the provisions of 37 CFR 1.136(a).

Applicant is reminded that any communications to the United States Patent and Trademark Office must be mailed to the address given in the heading and include the U.S. application no. shown above (37 CFR 1.5)

A copy of this notice MUST be returned with the response.

LAMONT M HUNTER

Telephone: (703) 308-9140 EXT 201

PART 1 - ATTORNEY/APPLICANT COPY

U.S. APPLICATION NUMBER NO.	INTERNATIONAL APPLICATION NO.	ATTY. DOCKET NO.
10/573,872	PCT/GB04/04173	PRC002

FORM PCT/DO/EO/905 (371 Formalities Notice)

COPY